

PTO/SB/01 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**☐ Declaration
Submitted
With Initial
Filing

OR

☒ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

P05769US01

First Named Inventor

BALL, Craig W., et al.

COMPLETE IF KNOWN

Application Number

10/613,635

Filing Date

July 2, 2003

Art Unit

2155

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR DISTRIBUTING DOCUMENTS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR



was filed on (MM/DD/YYYY)

07/02/2003

as United States Application Number or PCT International

Application Number

10/613,635

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

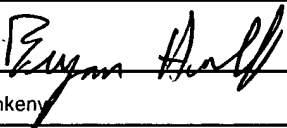
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DECLARATION — Utility or Design Patent Application

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Address			
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Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <div style="text-align: right;">Craig W.</div>		Family Name or Surname <div style="text-align: right;">Ball</div>	
Inventor's Signature <i>Craig Ball</i>			Date <i>11-12-03</i>
Residence: City <div style="text-align: center;">Indianola</div>	State <div style="text-align: center;">Iowa</div>	Country <div style="text-align: center;">USA</div>	Citizenship <div style="text-align: center;">USA</div>
Mailing Address 1511 West Detroit Avenue			
City <div style="text-align: center;">Indianola</div>	State <div style="text-align: center;">Iowa</div>	ZIP <div style="text-align: center;">50125</div>	Country <div style="text-align: center;">USA</div>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <div style="text-align: right;">Samuel Adams</div>		Family Name or Surname <div style="text-align: right;">Thompson</div>	
Inventor's Signature <i>Samuel Thompson</i>			Date <i>11/12/03</i>
Residence: City <div style="text-align: center;">Norwalk</div>	State <div style="text-align: center;">Iowa</div>	Country <div style="text-align: center;">USA</div>	Citizenship <div style="text-align: center;">USA</div>
Mailing Address 457 30th Avenue			
City <div style="text-align: center;">Norwalk</div>	State <div style="text-align: center;">Iowa</div>	ZIP <div style="text-align: center;">50211</div>	Country <div style="text-align: center;">USA</div>
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>1</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

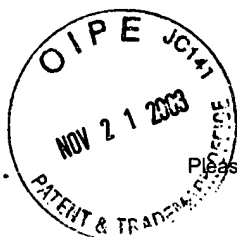
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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Bryan Conrad		Huff	
Inventor's Signature 		Date <u>11/12/03</u>	
Residence: City	Ankeny	State	Iowa
Country	USA		
Mailing Address			
3705 NW 2nd			
Mailing Address			
City	Ankeny	State	Iowa
Zip	50021	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country			
Mailing Address			
Mailing Address			
City		State	
Zip		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country			
Mailing Address			
Mailing Address			
City		State	
Zip		Country	

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PTO/SB/81 (10-00)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/613,635
Filing Date	July 2, 2003
First Named Inventor	BALL, Craig W., et al.
Group Art Unit	2155
Examiner Name	
Attorney Docket Number	P05769US01

I hereby appoint:

☒ Practitioners at Customer Number

22885 →

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OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Individual Name

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Address

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State

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Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Craig W. Ball

Signature

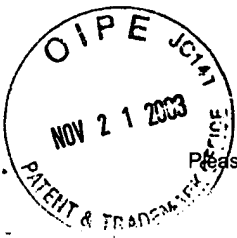
Craig Ball

Date

11-12-03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 3 forms are submitted.



Please type a plus sign (+) inside this box → ☐

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Attorney Docket Number	P05769US01

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- ☒ Practitioners at Customer Number →

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☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Address					
Address					
City		State		Zip	
Country					
Telephone		Fax			

I am the:

- ☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Samuel Adams Thompson
Signature	
Date	11/12/03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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Attorney Docket Number	P05769US01

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- ☐ Practitioner(s) named below:

Name	Registration Number

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<input type="checkbox"/> Firm or Individual Name					
Address					
Address					
City		State		Zip	
Country					
Telephone		Fax			

I am the:

- ☒ Applicant/Inventor.
- ☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Bryan Conrad Huff
Signature	
Date	11/12/03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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